

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH

COVER SHEET PG 1

2004 JAN 15 PM 2:06

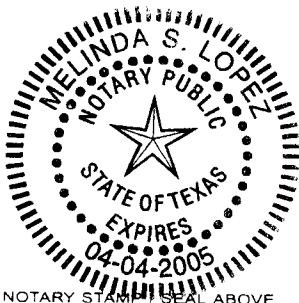
The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00051464		2 Total pages filed.		
3 CANDIDATE / OFFICEHOLDER NAME	TITLE Councilman		FIRST Enrique	MI	OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
	NICKNAME "Kille"		LAST MARTIN	SUFFIX		
4 CANDIDATE / OFFICEHOLDER ADDRESS <input checked="" type="checkbox"/> Change of Address	ADDRESS / PO BOX P.O. Box 240433		APT / SUITE # SAT	CITY 78224		STATE TX
ZIP CODE						
5 CAMPAIGN TREASURER NAME	TITLE LTC (Ret)		FIRST Tommye	MI		
	NICKNAME		LAST Malone	SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE)		APT / SUITE #	CITY		STATE
ZIP CODE						
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER		EXTENSION		
		(210) 635-9535				
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input checked="" type="checkbox"/> Final report (Attach C/OH - FR)					
9 PERIOD COVERED	Month Day Year 07 / 01 / 03		THROUGH		Month Day Year 12 / 31 / 03	
10 ELECTION	ELECTION DATE Month Day Year 05 / 05 / 01		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any) City Council Dist 4		12 OFFICE SOUGHT (if known) N/A			
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	-- Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. --					
	Name					
	Address / PO Box Apt / Suite # City State Zip Code					
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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14 C/OH NAME Enrique "Kike" Montin		15 ACCOUNT # (Ethics Commission filers) 00051464		
16 NOTICE FROM POLITICAL COMMITTEE(S)	** This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. **			
	COMMITTEE TYPE	COMMITTEE NAME		
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS		
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 NO REPORTABLE ACTIVITY		<input checked="" type="checkbox"/> Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)		
18 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS). UNLESS ITEMIZED	\$	
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	
	EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
		4.	TOTAL POLITICAL EXPENDITURES	\$
	OUTSTANDING LOAN TOTALS	5.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,433. ⁷⁰

19 AFFIDAVIT



AFFIX NOTARY STAMP & SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Enrique "Kike" Martin, this the 15th day of January, 2004, to certify which, witness my hand and seal of office.

Melinda S. Long
Signature of officer administering

Melinda S. Lopez
Printed name of officer administering oath

Notary
Title of officer administering oath

